

20-24

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997						Application or Docket Number	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY RATE FEES BASIC FEE <input type="checkbox"/> 395.00 TOTAL CLAIMS <input type="checkbox"/> 19 minus 20 = * INDEPENDENT CLAIMS <input type="checkbox"/> 2 minus 3 = * MULTIPLE DEPENDENT CLAIM PRESENT	RATE FEES x\$11= <input type="checkbox"/> 790.00 x41= <input type="checkbox"/> +135= <input type="checkbox"/> TOTAL <input type="checkbox"/> 395.00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL ENTITY OR OTHER THAN SMALL ENTITY RATE ADDITIONAL FEE CLAIMS REMAINING AFTER AMENDMENT HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus ** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	RATE ADDITIONAL FEE x\$11= <input type="checkbox"/> x41= <input type="checkbox"/> +135= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
AMENDMENT A (Column 1) (Column 2) (Column 3)						RATE ADDITIONAL FEE CLAIMS REMAINING AFTER AMENDMENT HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus ** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	RATE ADDITIONAL FEE x\$11= <input type="checkbox"/> x41= <input type="checkbox"/> +135= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
AMENDMENT B (Column 1) (Column 2) (Column 3)						RATE ADDITIONAL FEE CLAIMS REMAINING AFTER AMENDMENT HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus ** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	RATE ADDITIONAL FEE x\$11= <input type="checkbox"/> x41= <input type="checkbox"/> +135= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
AMENDMENT C (Column 1) (Column 2) (Column 3)						RATE ADDITIONAL FEE CLAIMS REMAINING AFTER AMENDMENT HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus ** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	RATE ADDITIONAL FEE x\$11= <input type="checkbox"/> x41= <input type="checkbox"/> +135= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.